FORM D

SEC Mail Processing Section

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

MAY 05 LUUB

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, **SECTION 4(6), AND/OR**

Washington, DC

3235-0076 Expires: April 30,2008 Estimated average burden hours per response.....16.00

SEC USE ONLY					
Prefix	Serial				
DATE F	RECEIVED				
}					

Iame of Offering (check if this is an amendment and name has changed, and indicate change.) Endavo Media and Communications, Inc. Common Stock Founders Shares iling Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment A. BASIC IDENTIFICATION DATA Enter the information requested about the issuer Iame of Issuer (check if this is an amendment and name has changed, and indicate change.) Indavo Media and Communications, Inc. Indavo Media and Communications, Inc. Indavo Media and Communications, Inc. Indavo Media and Street, City, State, Zip Code) O Glenlake Parkway, Suite 130, Atlanta, Georgia, 30328 Indavo Media Business Operations (Number and Street, City, State, Zip Code) Indifferent from Executive Offices)	ULOE	- 0804	
Rule 504 Rule 505 Rule 506 Section 4(6) Rule 505 Rule 506 Rule 506 Section 4(6) Rule 505 Rule 506 Rule 506 Rule 506 Rule 506 Rule 505 R		0804	
A. BASIC IDENTIFICATION DATA A. BAS		0804	
A. BASIC IDENTIFICATION DATA Description: Lame of Issuer (check if this is an amendment and name has changed, and indicate change.) Endavo Media and Communications, Inc. Endavo Media and Street, City, State, Zip Code) O Glenlake Parkway, Suite 130, Atlanta, Georgia, 30328 Endavos of Principal Business Operations (Number and Street, City, State, Zip Code)	Telephone N	- 0804	
Enter the information requested about the issuer lame of Issuer (Telephone N	_ _ _ 0804	
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Indavo Media and Communications, Inc. Indavo Media and C	Telephone N	0804	^~=
O Glenlake Parkway, Suite 130, Atlanta, Georgia, 30328 Oddress of Principal Business Operations (Number and Street, City, State, Zip Code) (Number and Street, City, State, Zip Code)	Telephone N	-	96/3
0 Glenlake Parkway, Suite 130, Atlanta, Georgia, 30328 ddress of Principal Business Operations (Number and Street, City, State, Zip Code)	Telephone N	, e	
ddress of Principal Business Operations (Number and Street, City, State, Zip Code)		lumber (Including Are	a Code)
	377-843-7242		ŕ
t with the transfer of the cal	Telephone t	Number (Including Are	a Code)
rief Description of Business	1		
Provision of media players, content management systems and distribution networks			
ype of Business Organization		DDAACEC	NED.
·· _	ease specify):	PROCES	ントレ
business trust limited partnership, to be formed	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	E MAY 0720	00
Month Year		MAT U I ZU	UÖ
ctual or Estimated Date of Incorporation or Organization: 12 99 Actual Estima	ated	THOMSON RE	HEDO
urisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:	!_	ILICIAIOCIA KE	OIEK2
CN for Canada; FN for other foreign jurisdiction)	RE		
ENERAL INSTRUCTIONS			
ederal: /ho Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or 7d(6).	Section 4(6), 1	7 CFR 230.501 et seq.	or 15 U.S.C.
Then To File: A notice must be filed no later than 15 days after the first sale of securities in the offering, and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given beliable it is due, on the date it was mailed by United States registered or certified mail to that address.	A notice is dee ow or, if receiv	med filed with the U.S ed at that address after	S. Securities r the date on
There To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 2054	49.		
opies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually hotocopies of the manually signed copy or bear typed or printed signatures.		opies not manually sig	ned must be
nformation Required: A new filing must contain all information requested. Amendments need only report tereto, the information requested in Part C, and any material changes from the information previously supplied to be filed with the SEC.	the name of the	e issuer and offering, and B. Part E and the Ap	any changes pendix need
iling Fee: There is no federal filing fee.			
tate:			
his notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sal ILOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Sere to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for tecompany this form. This notice shall be filed in the appropriate states in accordance with state law. It is notice and must be completed.	curities Admir the exemption,	nistrator in each state a fee in the proper a	where sales mount shall
ATTENTION			

filing of a federal notice.

A. BASIC IDENTIFICATION DATA			
2. Enter the information requested for the following:			
• Each promoter of the issuer, if the issuer has been organized within the past five years;			
Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of the control of the contro	of, 10% or mo	re of a cla	ss of equity securities of the issuer.
Each executive officer and director of corporate issuers and of corporate general and man	aging partner;	of partne	ership issuers; and
Each general and managing partner of partnership issuers.			•
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer		or []	General and/or Managing Partner
Full Name (Last name first, if individual) Hamm, Paul			
Business or Residence Address (Number and Street, City, State, Zip Code) 10 Glenlake Parkway, Suite 130, Atlanta, Georgia 30328		, -	
Check Box(es) that Apply: Promoter Beneficial Owner Z Executive Officer	Directo	or 📗	General and/or Managing Partner
Full Name (Last name first, if individual) Pino, Mario			
Business or Residence Address (Number and Street, City, State, Zip Code) 2700 Westhall Lane, Suite 117, Maitland, Florida, 32751			
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Directo	u []	General and/or Managing Partner
Full Name (Last name first, if individual) Contardo, Peter			
Business or Residence Address (Number and Street, City, State, Zip Code)			
2700 Westhall Lane, Suite 117, Maitland, Florida, 32751			
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Directo	or 🔲	General and/or Managing Partner
Full Name (Last name first, if individual)			
Business or Residence Address (Number and Street, City, State, Zip Code)	_		
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Directo	м 🗀	General and/or Managing Partner
Full Name (Last name first, if individual)			
Business or Residence Address (Number and Street, City, State, Zip Code)			
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Directo	or 🗌	General and/or Managing Partner
Full Name (Last name first, if individual)			
Business or Residence Address (Number and Street, City, State, Zip Code)			
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Directo	r 🗌	General and/or Managing Partner
Full Name (Last name first, if individual)			
Business or Residence Address (Number and Street, City, State, Zip Code)	-	<u> </u>	
(Use blank sheet, or conv and use additional copies of this st	heet, as necess	arv)	

			, , , , , , , , , , , , , , , , , , , ,		B. 1	NFORMAT	ION ABOU	T OFFERI	NG				
I.	Has the	issuer solo	i, or does ti						this offering	~ (Yes	No
2.	What is	the minim	ium investn			• •	•					\$ <u>0.0</u>	0
3.		_	-		_					1		ست	No ⊠
4.	commis If a pers or state	sion or sim son to be lis s, list the n	ilar remune ted is an as:	ration for s sociated pe roker or de	solicitation erson or ago ealer. If mo	of purchasent of a broker ore than five	ers in conne cer or deale e (5) persoi	ection with r registered ns to be list	given, direct sales of sect d with the Sl ted are assoct	urities in t EC and/or	he offering with a stat	;. e	
Full		Last name	first, if ind	ividual)	· · · · · · ·								
		Residence	Address (N	lumber and	l Street, C	ity, State, 2	Lip Code)						
Nar	ne of As	sociated B	oker or De	aler		·	<u></u>						
Stat	tes in Wi	ich Persor	Listed Ha	Solicited	or Intends	to Solicit	Purchasers			1			
							•				.,	☐ Ai	I States
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR
Ful	l Name (Last name	first, if ind	ividual)									
Bus	siness or	Residence	Address (1	Number an	d Street, C	ity, State,	Zip Code)						. <u> </u>
Nan	ne of As:	sociated Bi	oker or De	aler									
Stat	les in Wh	ich Person	Listed Has	s Solicited	or Intends	to Solicit	Purchasers					· · · ·	
	(Check	"All States	or check	individual	States)			***************************************		<u> </u>	•	☐ AI	I States
	IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	ME NY VT	MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR
Full	l Name (Last name	first, if indi	ividual)									
Bus	iness or	Residence	Address (1	Number an	d Street, C	ity, State, 2	Zip Code)						
Nan	ne of As	sociated Br	oker or De	aler				 					
Stat	es in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers				 -		
	(Check	"All States	" or check	individual	States)	•••••••	***************************************	***********			•••••	☐ All	States
	AL IL MT RI	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount alreadle. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, che	eck	
	this box and indicate in the columns below the amounts of the securities offered for exchange a already exchanged.	ınd	
	aneauy exchangeu.	Aggregate	Amount Already
	Type of Security	Offering Price	Sold
	Debt	i '——	_ \$
	Equity	<u>\$</u> 17,000.00	\$_0.00
	Convertible Securities (including warrants)	.¦. \$	\$
	Partnership Interests	[. s	<u> </u>
	Other (Specify)		\$
	Total	<u>\$</u> _17,000.00	\$_0.00
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in toffering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indic the number of persons who have purchased securities and the aggregate dollar amount of the purchases on the total lines. Enter "0" if answer is "none" or "zero."	ate	
	Accredited Investors	Number Investors	Aggregate Dollar Amount of Purchases \$ 0.00
	Non-accredited Investors		\$ 0.00
	Total (for filings under Rule 504 only)		s 0.00
	Answer also in Appendix, Column 4, if filing under ULOE.	T -	_ •
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securit sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question I	he	
	m 40%	Type of	Dollar Amount
	Type of Offering	Security N/A	Sold
	Rule 505		\$ 0.00
	Regulation A	†" 	\$ 0.00
	Rule 504		\$ 0.00
	Total		\$_0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of t securities in this offering. Exclude amounts relating solely to organization expenses of the insur The information may be given as subject to future contingencies. If the amount of an expenditure not known, furnish an estimate and check the box to the left of the estimate.	ęr.	
	Transfer Agent's Fees	ļ <u>[</u>] \$
	Printing and Engraving Costs	ļ] \$
	Legal Fees		\$ 5,000.00
	Accounting Fees	ļ [\$
	Engineering Fees	ļ	
	Sales Commissions (specify finders' fees separately)	, <u> </u>	\$
	Other Expenses (identify)	; -	
	Total	_	\$ 5,000.00

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF	MUCEEDS	
	b. Enter the difference between the aggregate offering price given in response to Part C — Question 1 and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted gross proceeds to the issuer."		s_ -0.00 12,000,00
	Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C — Question 4.b above.		
		Payments to Officers, Directors, &	Payments to Others
	Salaries and fees	Affiliates	
	Purchase of real estate	_	
			. [\$
	Purchase, rental or leasing and installation of machinery	¬\$	
	Construction or leasing of plant buildings and facilities		-
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	_	
	Repayment of indebtedness	_	–
	Working capital		
	, ·	 ¬\$	_
	Other (specify).		. 🗆 "
		¬ ¢	_ □\$
			_
	Column Totals	s_0.00	
	Total Payments Listed (column totals added)	€ \$_ ©	.00 12,0∞,00
	D. FEDERAL SIGNATURE		
sign	ssuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice ture constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commist formation furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of	sion, upon writte	ale 505, the following on request of its staff,
Issu	r (Print or Type) Signaty (1)	Date	_
EN	DAVO MEDIA AND COMMUNICATIONS, INC.	4/29/0	-8
Nan	e of Signer (Print or Type) Title of Signer (Print or Type)		
Ω.	UL D HAMM PRESIDENT		